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Complete if Known Substitute for form 1449/PTO Application Number 10/551,870 Filing Date 11/16/2005 INFORMATION DISCLOSURE First Named Inventor Benny Bang-Andersen STATEMENT BY APPLICANT Art Unit 1625 (Use as many sheets as necessary) **Examiner Name** David K. O'Dell **Attorney Docket Number** 435-US-PCT

U. S. PATENT DOCUMENTS								
Examiner Initials*	Cite No.1	Document Number  Number-Kind Code <sup>2 of known)</sup>	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear			
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